

# FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- ☐ This is an **initial**\* Statement of Organization  
☒ This is an **amended**\* Statement of Organization

\*An initial Statement of Organization should be filled within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$500. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

FORM DR-1 (Rev. 07/00)	STATEMENT OF ORGANIZATION
For Office Use Only	
Comm. #	17520 in WRS
Indexed	
Audited	
Computer	WST DB

JAN 9 2004  
pm 1-8

## COMMITTEE NAME (Required by law)

Joyce for Supervisor (Formerly - Joyce for Senate)

IMPORTANT: Indicate type of committee you are reporting for:

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support slate of candidates (list candidates under purpose of committee)

COMMITTEE TREASURER (Required by law) This address used for all reminders and correspondence)

COMMITTEE CHAIR (List additional officers on separate page)

Name Linda Joyce	Name Phillip Hascall
Mailing Address 67239 Troublesome Creek Rd.	Mailing Address P.O. Box 206
City, State Zip Code Atlantic IA 50022	City, State Zip Code Atlantic IA 50022
Phone 712 243-2395	Phone 712 243-3191
e-Mail	e-Mail

INDICATE PURPOSE OF COMMITTEE - Check One Box ☒ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)  
 Comment or description:

### All Candidates Enter:

Office Sought: County Supervisor

District: 1st

Political Party (if applicable) Democrat

Year Standing for Election: 2004

County/Local Candidates and Local Ballot/Franchise Committees Enter:

County: Cass

Date of Election: 11-2-2004

### Bank Account Name

Joyce for Supervisor

Name of Financial Institution/type of Account

Nishna Valley Credit Union

Mailing Address

200 Maple St. P.O. Box 350

City

State

Zip

Atlantic IA 50022

### Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor

Russell Joyce

Mailing Address

67239 Troublesome Creek Rd.

City

State

Zip

Atlantic IA 50022

Phone

712 243-2395

e-Mail

joycefam@netc.net

### DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION

Indicate disposition of funds by marking appropriate number in box: ☒

(1) DONATED TO COUNTY CENTRAL COMMITTEE

(2) DONATED TO LOCAL/STATE/NAT'L POLITICAL PARTY (underline one)

(3) DONATED TO CHARITABLE ORGANIZATION

(specify)

(4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)

(5) PARTISAN CONGRESSIONAL DISTRICT FUND

(6) PRORATED REFUND TO CONTRIBUTORS

(7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE

(CANDIDATES ONLY)

(8) RETURN TO PARENT ENTITY GENERAL FUND (PACS ONLY)

(9) OTHER (PACS ONLY), PLEASE BE SPECIFIC

### STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON

I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$500.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 351. I affirm that all committee officers have been informed of their appointment and obligations.

Signature of Treasurer

Date Signed

Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

JAN 9 2004

pm 1-8

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1466
Indexed	on
Audited	1-12-04
Computer	WKS

COMMITTEE NAME (Must be same as on Statement of Organization)

Joyce for Senate

IMPORTANT: Indicate type of committee you are reporting for: ☐

- ( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
( 8 ) Support State of Candidates

Dorinda Joyce  
SIGNATURE OF TREASURER (or person filing this report)

712-243-2395  
TELEPHONE

1-7-04  
DATE SIGNED

**Routine Penalties Due For Late Filed Reports Range from \$20 to \$800**

### SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Jan. 19, 2004 REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR.  
(report date) Indicate one ☒

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

### STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 766.66

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) .....

1.68

Schedule F: Loans Received total (Attach Schedule F) .....

—

Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....

—

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

768.34

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) .....

479.22

Schedule F: Loan Repayments total (Attach Schedule F) .....

—

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....

\$ 289.12

UNPAID BILLS (From Schedule D - Attach Schedule D) .....

\$ —

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....

\$ —

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....

\$ —

#### CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ —

<b>FORM DR-1: Statement of Organization</b> <b>ID 17520</b> Type <b>County Candidate</b> Status <b>Amended</b> Name <b>Joyce for Supervisor</b>  Filed/Amended <b>1/9/2004</b> Date	Form <b>DR-1</b> Web Reporting System For Office Use Only Comm. # 17520 Indexed Audited Computer	Statement of Organization Rev. 09/2003
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Committee Treasurer Name <b>Linda Joyce</b> Address <b>67239 Troublesome Creek RD</b>  <b>Atlantic, IA 50022</b> Primary Ph. <b>(712) 243-2395</b> Secondary Ph. e-Mail <b>joycefam@metc.net</b>	Committee Chair Name <b>Phillip Hascall</b> Address <b>P.O. Box 206</b>  <b>Atlantic, IA 50022-0206</b> Primary Ph. <b>(712) 243-3191</b> Secondary Ph. e-Mail
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Purpose

Office Sought: <b>County Supervisor</b> Party: <b>Democratic</b> County: <b>Cass</b>	District: <b>0</b> Year Standing for Election: <b>2004</b> Date of Election: <b>11/2/2004</b>
Primary Bank Account Name <b>Nishna Valley Credit Union</b> Address <b>200 Maple Street, P.O. Box 350</b>  <b>Atlantic, IA 50022-0350</b> Account Type <b>Checking</b> Account Name <b>Joyce for Senate</b>	Candidate name & address Name <b>Russell Joyce</b> Address <b>67239 Troublesome Creek Road</b>  <b>Atlantic, IA 50022</b> Primary Ph. <b>(712) 243-2395</b> e-Mail <b>joycefam@metc.net</b>

### Statement of Affirmation By Treasurer and Candidate; or Political Committees, By Chairperson

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.
2. That Iowa Code section 68A.6 and rule 351-4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.
3. That Iowa Code section 68A.14 and rules 351-4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule.
4. That Iowa Code section 68A.15 and rules 351-4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.
5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.40 through 68A.42 and rule 351-4.25.
6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

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Candidate:  
(signature and date)

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Treasurer:  
(signature and date)